



REQUEST FOR APPLICATIONS FY14

Suicide Awareness, Prevention & Postvention Grant

Release Date: January 14, 2013

Available at: <http://education.alaska.gov/tls/suicide/>

Letter of Intent to Apply Due: Feb. 1, 2013
Applications Due: March 11, 2013

**ALASKA DEPARTMENT OF EDUCATION & EARLY DEVELOPMENT
GENERAL APPLICANT INFORMATION**

**THE ORIGINAL, 5 PAPER COPIES and a ELECTRONIC COPY OF THE
COMPLETED
GRANT APPLICATION
MUST BE RECEIVED NO LATER THAN 4:00 P.M.
on March 11, 2013**

NOTE: Applications that are received after this time/date will be returned unopened and not considered unless applicant can provide an independent verification from the U.S. Post Office or delivery service that the delivery would have met the required deadline but was unavoidably detained by weather or the carrier's mechanical failure. *Applicants are strongly encouraged to notify the program contact as soon as possible if they expect an application delay due to weather or the carrier's mechanical failure.*

Mail to:

ATTN: Sharon Fishel
Alaska Department of Education & Early Development
Division of Teaching and Learning Support
P.O. Box 110500
Juneau, Alaska 99811-0500

Department of Education & Early Development Contact:

Sharon Fishel
Alaska Department of Education & Early Development
P.O. Box 110500
Juneau, Alaska 99811-0500
(907) 465-6523
Sharon.Fishel@alaska.gov

- **Applications which do not meet the specifications listed in Section II of this RFA may not be reviewed.**
- **Do not attach any additional support materials beyond what is identified as acceptable appendices. Excess materials will be discarded.**
- **Do not use spiral binding.**
- **Faxed, late, or incomplete applications will not be reviewed.**

All proposals must be submitted in the format specified in this RFA. Submission of a proposal indicates acceptance by the applicant of the appropriate state administrative conditions.

All applicants submitting applications in a timely manner will receive a Grant Application Receipt Acknowledgment by email or FAX.

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Section I

Summary

Suicide Awareness, Prevention & Postvention REQUEST FOR APPLICATIONS (RFA) FY14 Funding Period

A. Program Purpose

The Suicide Awareness, Prevention & Postvention (SAPP) grant provides an opportunity for schools to support programs, practices, and policies that focus on areas that are related to the State Suicide Prevention Plan Goals and Strategies

www.hss.alaska.gov/suicideprevention/pdfs_sspc/SSPC_2012-2017.pdf.

For example:

- Alaskan youth seek out healthy and appropriate relationships with role models in their community. (SSP Strategy 1.3)
- Communities will develop environments of respect, value, and connectedness for all members. (SSP Strategy 1.4)
- Communities will engage parents and other mentors important in the lives of children and youth in health promotion efforts. (SSP Strategy 1.5)
- The State of Alaska will support peer-to-peer wellness promotion and supports as an integral part of health promotion and suicide prevention. (SSP Strategy 1.9)
- Alaskans know how to identify when someone is at risk of suicide and how to respond appropriately to prevent suicide. (SSP Strategy 2.1)
- School Districts will implement broad screenings to identify not just imminent risk of suicide, but risk factors for suicide (substance use, violence, depression, etc.). (SSP Strategy 2.6)
- Communities will develop wellness coalitions that include suicide prevention in their mission/area of focus. (SSP Strategy 3.4)

B. Eligible Recipients

Any public school district is eligible to apply for SAPP funds; however, **grants will only be awarded to applicants who primarily serve at risk students as demonstrated by YRBS results and suicide demographics.** Only **one application** will be accepted from each district. The department also allows a consortium of two or more school districts to apply

10 priority points will be given to applications that will serve at risk students in:

- schools designated as alternative schools
- correctional facilities
- regions that have historically had high suicide rates as reported by the State of Alaska Epidemiology
<http://www.epi.alaska.gov/bulletins/catlist.jsp?cattype=Suicide>

5 priority points will also be given to applications that are submitted with a Letter of Support or Memorandum of Agreement with their local Mental/Behavioral Health Agencies and/or community partners.

C. Available Funding and Related Conditions

1. Projected Total Amount Available For Awards

Approximately \$250,000 will be available for the Suicide Awareness, Prevention, & Postvention Grant program. The number of grants and the grant amounts will be based on the number and quality of proposals submitted. It is estimated that the department will award 10 grant awards in this competition.

The maximum grant award is \$25,000.

The State reserves the right to award a smaller or larger amount of grant funds than requested based upon available funding and the recommendations of the review panel.

- 2. Grant Period:** 3 years, contingent upon state funding and substantial progress towards meeting grant goals and objectives and compliance with all grant requirements.

D. Use of Funds

Each eligible school district that receives an award may use the funds to carry out a broad array of activities. Eligible focus areas include but are not limited to:

- Healthy relationships
- School climate
- Schoolwide Positive Behavior Supports
- Mentoring
- Bullying prevention
- Natural helpers
- Crisis response training
- ASIST
- safeTALK
- Gatekeeper
- Mental Health First Aid
- Jason Foundation
- Signs of Suicide
- Sources of Strength
- Alcohol & Drug Abuse Programs
- Violence prevention
- Depression screenings
- Social Skills /Character building
- Rachel's Challenge

Services can be provided for students in preschool through high school.

Grant funds cannot be used to purchase facilities, support new construction, or fund endowments.

E. Technical Assistance and Application Review Process

All applicants must submit a letter of intent to apply for SAPP funding. Letters are requested by February 1, 2013. This letter will allow the department to identify potential applicants and communicate additional resources as well as direct technical assistance and support for the application process. Interested applicants who miss the deadline date are still welcome to apply – please contact the department for further details.

The department plans to offer **one** technical assistance conference call that will provide support for viable applications under this funding source.

Please refer to the department website for an up-to-date schedule of all technical assistance opportunities and resources. (<http://education.alaska.gov/tls/suicide/>)

Our website has a variety of helpful resources available to interested applicants including:

- General grant writing guidance
- National websites and publications of interest

Planned Technical Assistance:

For All Applicants The optional technical assistance audio conference will focus on writing a successful application. (The audio will be held on Jan 30, 2013 from 9:00-10:00 a.m.) Plans are for this call to be recorded and posted on the department website.

Individual technical assistance will be available by phone 907-465-6523 or email Sharon.Fishel@alaska.gov

A panel of reviewers composed of a minimum of five State of Alaska staff and/or other educators/state agency representatives with expertise in schools, communities, mental health, and suicide prevention will review eligible grants submitted and received by the deadline. Applications will be scored independently using the scoring form and rubric included in this RFA. Reviewers will be allowed to utilize the full breadth of the scoring points. Reviewers will then conference to clarify the accuracy of reviewers' understanding. The reviewers' final scores will be totaled to determine the order by which applications will be considered for funding; funds will be awarded to the highest scoring proposal(s).

Review panelists will be asked for recommendations for improving the project and comments on the feasibility of the budget. These comments may form the basis for adjustments negotiated to the project prior to issuance of the grant award.

F. Assurance

All grantees must complete all the required assurance contained in the application packet.

G. Conditions of Grant Award

Evaluation of grantee performance / continuation of funding:

Entities receiving state funds are required to meet all necessary reporting requirements of the grant. In awarding the grant, the state expects the grantees to conduct all activities and evaluation measures as written or negotiated in the approved grant proposal. Failure to provide the requested performance reports (reporting on and evaluating all activities as proposed; and implementing the grant as written) could result in the loss of funding. Any changes to the original funded proposal (including modifications to goals and/or objectives) must receive prior approval by the state.

The state reserves the rights to withhold funding, reduce funding, or terminate funding if the proposal is not meeting program reporting requirements, making substantial progress toward meeting identified performance goals and measures; or does not demonstrate a clear need for the allotted level of grant support.

After it has been awarded, the Alaska Department of Education & Early Development may terminate a grant by giving the grantee written notice of termination. In the event of termination after award, the Alaska Department of Education & Early Development shall reimburse the grantee for approved grant expenses incurred up to the notification of termination. This grant is subject to state appropriations and may be reduced or terminated based on state appropriated funds in any given fiscal year.

The state retains the right to refrain from making any awards if it determines that to be in its best interest. This RFA does not, by itself, obligate the state.

The state reserves the right to add terms and conditions during grant negotiations. These terms and conditions will be within the scope of the RFA and will not affect the proposal reviews.

After the completion of grant negotiations, the state will issue a written Notice of Intent to Award (NIA) and send copies to all applicants. The NIA will set out the names of all applicants and identify the proposal(s) selected for award.

The state reserves the right to modify annual awards based on the actual amount of appropriation towards this grant program.

The applicant is required to attend an annual grantee meeting. Additional funding above the grant award amount will be awarded for travel and related expenses.

H. Appeals Process

This is located on the legislative page at

- a) Go to: <http://www.legis.state.ak.us/cgi-bin/folioisa.dll/aac>
- b) Select: TITLE 4 Education and Early Development

- c) Scroll down to: 40. Appeals of Decisions to Deny or Withhold Funding. (4 AAC 40.010 - 4 AAC 40.050)

I. Timelines

RFA Released.....January 14, 2013

Optional Audio ConferenceJanuary 30, 2013

Letter of Intent to Apply Form Due..... On or before February 1, 2013

Grant Applications Due.....March 11, 2013 by 4:00 p.m.

Grant Review Period..... March-April 2013

Notice of Intent to Award..... by April 30, 2013

Grant funding begins.....July 1, 2013

Reports Due..... June 30 of each year and as required for state reporting

J. Application Submission

Notice of Intent to Apply forms are due to the Alaska Department of Education & Early Development on or before Feb. 1, 2013. (See form for delivery instructions.)

Suicide Awareness, Prevention & Postvention Grant Applications must be received by 4:00 p.m. on March 11, 2013.

Send an original and 5 copies to:

ATTN: Sharon Fishel
Department of Education & Early Development
Division of Teaching and Learning Support
801 West 10th Street, Suite 200
P.O. Box 110500
Juneau, Alaska 99811-0500

Section II

Application forms

Directions

A completed application must contain the following sections, in the order provided below.

1. **Cover Page** Use EED form # 05-13-023
2. **Table of Contents** Include a one-page table of contents.
3. **Page Numbers** All pages within the application must have page numbers.
4. **Program Summary/Abstract** Include a one-page summary of your project.
5. **Application Narrative.** Applicants must limit the **application narrative** to no more than 10 **double-spaced** pages. Pages must have a 1” margin on all sides and utilize a type size of 12 points or greater, preferably using Times New Roman font. **All sections should be clearly labeled for reviewers.** (All tables and charts should conform to the type size guidelines but can be single-spaced.) Applications that do not follow formatting guidelines may not be reviewed. In preparing the application, applicants should clearly keep in mind the selection criteria (rubrics) that will be used to evaluate applications, and ensure that each of these criteria is addressed in the narrative responses. The Narrative section includes information on:
 - **Need for project**
 - **Alignment with the State Suicide Prevention Plan (SSP)/ Project Design**
 - **Managing Programs, Services, and Supports**
 - **Partnerships & Community Stakeholders**

Please note: The following is not considered part of the 10 pages for the narrative:

Appendix A -Targeted Populations, Appendix B - Budget forms, including any contracts or MOAs, Appendix C - Assurance

6. **Budget and Budget Narrative** Provide a complete budget summary for **year one** of the project on the Excel forms provided by the department, referenced in the forms section of this application.
 - Budget narrative pages must explain all budgetary items, including any possible in-kind support, or funding provided by partners in the project.
 - Brief narrative of plans for use of funding for years two and three.
7. **Appendix** Each application may be accompanied by appendices, limited to the following: (Please note – the Appendices in **BOLD** text are required under this application)
 - A: Target Population Data- This should be clearly labeled “Appendix A”.**
 - B: Budget Forms, Budget Narrative Forms, Memorandums of Agreement/Contracts for Key Partners- This should be clearly labeled “Appendix B”.**
 - C: Assurance- This should be clearly labeled “Appendix C”.**

Other attachments to the application will not be accepted.

APPLICATION CHECKLIST

Due: March 11, 2013

A complete application must include, *in the order given below*, the following sections:

- ☐ The *Application Cover Page*, completed according to the instructions and signed by an authorized official.
- ☐ The *Table of Contents* form, completed to inform reviewers of where in your application, information can be found.
- ☐ The *Program Summary/Abstract* (no more than one page)
- ☐ The *Application Narrative* (no more than 10 pages double-spaced, 1" margins, 12 point font)
- ☐ The *Budget*
- ☐ *Appendices* as indicated
- ☐ Target Population Data- This should be clearly labeled "Appendix A".
- ☐ Budget Forms, Budget Narrative Forms, Memorandums of Agreement/Contracts for Key Partners- This should be clearly labeled "Appendix B".
- ☐ Assurance- This should be clearly labeled "Appendix C".

This checklist is for your own use and should not be submitted with your application!

Suicide Awareness, Prevention & Postvention Grant

COVER PAGE

EED FORM # 05-13-023

Organization _____

Mailing Address _____

Name of Contact Person _____

Telephone _____

E-mail address _____

Fax Number _____

Authorized Signatory for Budget Revisions/
Record and Report of Local Expenditures _____

Date _____

■ *Note: The general certifications and assurances that are signed and submitted by the district each spring (or provided by the applicant to EED) will apply to this federally funded program.*

Signature of Superintendent _____

Date _____

Title _____

\$ _____
Total Funding Requested Per Year

EED Use Only

Project Number: _____

Date Received: _____

Project Approval: _____

Amount Awarded: \$ _____

Program Abstract
(One Page Limit)

What is your project trying to do?

Targeted Population

a1a Targeted population chart

Name of each school site to be served	Types of data considered	# of students to be impacted	# of staff/community stakeholders to be trained or included
ABC School Alaska	<ul style="list-style-type: none">• 2011 YRBS• School Climate & Connectedness Survey• Epidemiology Reports	50	25

Application Questions

Note to applicants – provide responses to each question. You may utilize as much space as you need provided you comply with the page limit requirements for the total narrative package:

Need for Project

a1b. Who is your targeted population of students to be served under this project?

a2. What data do you have that indicates you serve an “at risk” population and have a need in your community for services? (YRBS results, suicide demographics) Use Appendix A for data.

a3. What other prevention programs and services exist in the community and why are they insufficient to meet the needs of your targeted audience?

Aligning with the State Suicide Prevention Plan (SSP)/Project Design

b1. What specific SPP strategies will your program target? What activities will be proposed? Why do you believe these activities will be effective in your community and how will you measure success?

Managing Programs, Services and Supports

c1. Who will manage the project? What specific duties will they be responsible for?

c2. What type of staff (certified, classified, volunteers, community partners) will your project utilize and how are they appropriate for the scope of work needed for the project?

c3. What types of professional development will be offered to any project staff and how will that build capacity for delivering your project? (Justification needs to be provided for

the use of funds for travel. If any funds are used to become a “Trainer” of a nationally recognized program, those individuals will be placed on the DEED trainer list.)

Partnerships and Community Stakeholders

d1. Who will be the key partners/ community stakeholders you will involve in your project?

d2. How will your project work with other school-based and community providers to maximize services for your targeted population?

Budget

Using the prescribed Budget Form/Budget Narrative documents, how will you utilize grant funds to support your proposed program design? Provide any copies of contracts or memoranda of agreements included as Appendix C.

Reviewers Form for Suicide Awareness, Prevention & Postvention

A: NEED FOR PROJECT

What needs exist in your community that could be addressed through this project?

Q#	Question	Need for Project 35 points	Inadequate (information not provided)	Minimal (requires additional clarification)	Good (clear and complete)	Excellent (concise and thoroughly developed)
a1a	Targeted Population/priority points	Clearly addresses targeted “at risk” population identified through RFA.	0			10
a1b	Who is your targeted population of students to be served under this project?	Data clearly indicates services aimed at “at-risk” populations.	0	1	3	5
a2	What data do you have that indicates you serve an “at risk” population and have a need in your community for services? (YRBS results, suicide demographics) Use Appendix A for data.	Data clearly indicates services aimed at “At risk” populations and that services are needed.	0	5	10	15
a3	What other prevention programs and services exist in the community and why are they insufficient to meet the needs of your targeted audience?	Clearly describes other suicide awareness and prevention projects currently serving target population and explains why those services are insufficient to meet identified needs.	0	1	3	5

B: ALIGNING WITH THE STATE SUICIDE PREVENTION PLAN (SSP)/PROJECT DESIGN

How will you align activities with the state suicide prevention plan?

Q#	Question	Aligning with Suicide Prevention Plan 30 points	Inadequate (information not provided)	Minimal (requires additional clarification)	Good (clear and complete)	Excellent (concise and thoroughly developed)
b1	Who is your targeted population of students to be served under this project? What specific SPP strategies will your program target? What activities will be proposed? Why do you believe these activities will be effective in your community and how will you measure success?	Activities clearly address specific goals or strategies of the SPP. Clearly describes the incorporation of research-based quality practices and suicide prevention activities. Clear plans to measure successful strategies.	0	5	20	30

C: MANAGING PROGRAMS, SERVICES, AND SUPPORTS

How will you manage the programs, services and supports provided through this project?

Q#	Question	Managing Programs, Services and Supports 15 points	Inadequate (information not provided)	Minimal (requires additional clarification)	Good (clear and complete)	Excellent (concise and thoroughly developed)
c1	Who will manage the project? What specific duties will they be responsible for?	Clearly identified management structure. Clearly defined roles and responsibilities for staff.	0	1	3	5
c2	What type of staff (certified, classified, volunteers, community partners) will your project utilize and how are they appropriate for the scope of work needed for the project?	Clearly defined project staffing that is appropriate for the scope of work.	0	1	3	5
c3	What types of professional development will be offered to any project staff and how will that build capacity for delivering your project? (Justification needs to be provided for the use of funds for travel. If any funds are used to become a “Trainer” of a nationally recognized program, those individuals will be placed on the DEED trainer list.)	Professional development is clearly described to build capacity for the suicide awareness and prevention activities planned.	0	1	3	5

D: PARTNERSHIPS AND COMMUNITY STAKEHOLDERS**How will you involve community partners and stakeholders in your project?**

Q#	Question	Partnerships and Community Stakeholders - 25 points	Inadequate (information not provided)	Minimal (requires additional clarification)	Good (clear and complete)	Excellent (concise and thoroughly developed)
d1a	Targeted Population/priority points	Clearly demonstrates community partnership with local Behavioral/Mental Health Agencies as Identified through this RFA. MOA's included in Appendix C.	0			5
d1b	Who will be the key partners/ community stakeholders you will involve in your project?	Clearly identified key partners that represent a strong school and community base.	0	1	3	5
d2	How will your project work with other school-based and community providers to maximize services for your targeted population?	Clearly defined specific local partners identified that will maximize services for the targeted population.	0	5	10	15

E: BUDGET**How will you utilize grant funds to support your proposed project design?**

Q#	Question	Budget 20 points	Inadequate (information not provided)	Minimal (requires additional clarification)	Good (clear and complete)	Excellent (concise and thoroughly developed)
e1	How has the applicant provided the required budget detail?	Detailed budget and budget narrative provided that aligns with project activities and design.	0	1	3	5
e2	How has the applicant provided justification that the expenses related to program services are reasonable and necessary?	Funding request is reasonable for proposed services.	0	1	3	5
e3	How has the applicant provided the detail necessary on professional services?	Professional services subcontracts are clearly defined and described. MOAs included for any subcontractors that will provide services for a fee.	0	1	3	5
e4	How will the applicant use grant funding for years two and three?	Clearly describe plans for use of funds in subsequent years that align with project purpose.	0	1	3	5

**Letter of Intent to Apply Form – FY14 Application
Suicide Awareness, Prevention, & Postvention Applicants**

Name of Organization: _____

Address: _____

Primary Contact Name: _____

Email: _____

Give a brief description of your proposed services. When do services occur? Who is the target audience? Who provides the services or programming?

Give a brief description of the process that will be used to develop this application.

What types of technical assistance from the Department of Education & Early Development would assist you in your proposal preparation?

This Intent to Apply form is due to the department by Feb. 1, 2013.

The form can be mailed, faxed or emailed – a confirmation email will be delivered to all applicants that meet the filing deadline.

Sharon Fishel

Alaska Department of Education & Early Development

P.O. Box 110500, Juneau, AK. 99811-0500

Sharon.Fishel@alaska.gov, FAX: 465-2713

Forms Page:
Budget Form:

<http://www.education.alaska.gov/forms/home.cfm>

Please see Financial Grants Administrative Forms section:

Financial Grants Administrative Forms		
<i>For assistance on these forms, call 465-2939.</i>		
Number	Form Name	Due Date
05-07-069	Program Budget and Narrative Univ. Non-Profit - MS Excel	As Needed
05-07-070	Request for Reimbursement Univ. Non-Profit and Report - MS Excel 2003	Quarterly
05-07-071	Program Budget and Narrative School District - MS Excel	As Needed
05-07-072	Request for Reimbursement School District and Report - MS Excel 2003	Quarterly

Targeted Population

Grants will only be awarded to applicants that will primarily serve “at risk” students as defined by state and or local Youth Risk Behavior Survey (YRBS) results, School Climate & Connectedness survey results, and local suicide demographics.

Alaska Department of Education & Early Development

2013-2014 ASSURANCES

CERTIFICATIONS REGARDING DEBARMENT AND SUSPENSION

As required by Executive Order 12549, Debarment and Suspension, and implemented at 34 CFR Part 85, for prospective participants in primary covered transactions, as defined at 34 CFR Part 85, Sections 85.105 and 85.110--

A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (2)(b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transaction (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

CERTIFICATIONS REGARDING CENTRAL CONTRACTOR REGISTRATION (CCR) AND DATA UNIVERSAL NUMBERING SYSTEM (DUNS)

The Central Contractor Registration (CCR) is the Federal repository into which an entity must provide information required for the conduct of business as a recipient. Information about registration procedures can be found at the CCR website: <http://www.ccr.gov>.

The Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number is a nine-digit universal identifier established and assigned by D&B to uniquely identify Federal financial assistance applicants, as well as recipients and their direct subrecipients. A DUNS number may be obtained by telephone at 866-705-5711 or through the website: <http://fedgov.dnb.com/webform>.

As an authorized agency that makes subawards that contains federal funds, 2 CFR 25.200 requires the Department of Education & Early Development (DEED) to ensure that each entity that does not have an exemption under 2 CFR 25.110 does the following:

- Be registered in the CCR prior to submitting an application or plan;
- Maintain an active CCR registration with current information at all times during which it has an active federal award or an application or plan under consideration by DEED; and
- Provide its DUNS number in each application or plan it submits to DEED.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

NAME OF GRANTEE	PR/AWARD NUMBER AND / OR PROJECT NAME
DUNS NUMBER	CENTRAL CONTRACTOR REGISTRATION (CCR) EXPIRATION
PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
SIGNATURE	DATE

